

Best Available Copy

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ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.P.	127-39-110	9/12
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	RS	41280	12-5-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

Rejected N Non-elected  
Allowed I Information  
(Through payment) Canceled A Appeal  
Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
1	12/1/00	51	12/1/00	101	12/1/00
2	12/1/00	52	12/1/00	102	12/1/00
3	12/1/00	53	12/1/00	103	12/1/00
4	12/1/00	54	12/1/00	104	12/1/00
5	12/1/00	55	12/1/00	105	12/1/00
6	12/1/00	56	12/1/00	106	12/1/00
7	12/1/00	57	12/1/00	107	12/1/00
8	12/1/00	58	12/1/00	108	12/1/00
9	12/1/00	59	12/1/00	109	12/1/00
10	12/1/00	60	12/1/00	110	12/1/00
11	12/1/00	61	12/1/00	111	12/1/00
12	12/1/00	62	12/1/00	112	12/1/00
13	12/1/00	63	12/1/00	113	12/1/00
14	12/1/00	64	12/1/00	114	12/1/00
15	12/1/00	65	12/1/00	115	12/1/00
16	12/1/00	66	12/1/00	116	12/1/00
17	12/1/00	67	12/1/00	117	12/1/00
18	12/1/00	68	12/1/00	118	12/1/00
19	12/1/00	69	12/1/00	119	12/1/00
20	12/1/00	70	12/1/00	120	12/1/00
21	12/1/00	71	12/1/00	121	12/1/00
22	12/1/00	72	12/1/00	122	12/1/00
23	12/1/00	73	12/1/00	123	12/1/00
24	12/1/00	74	12/1/00	124	12/1/00
25	12/1/00	75	12/1/00	125	12/1/00
26	12/1/00	76	12/1/00	126	12/1/00
27	12/1/00	77	12/1/00	127	12/1/00
28	12/1/00	78	12/1/00	128	12/1/00
29	12/1/00	79	12/1/00	129	12/1/00
30	12/1/00	80	12/1/00	130	12/1/00
31	12/1/00	81	12/1/00	131	12/1/00
32	12/1/00	82	12/1/00	132	12/1/00
33	12/1/00	83	12/1/00	133	12/1/00
34	12/1/00	84	12/1/00	134	12/1/00
35	12/1/00	85	12/1/00	135	12/1/00
36	12/1/00	86	12/1/00	136	12/1/00
37	12/1/00	87	12/1/00	137	12/1/00
38	12/1/00	88	12/1/00	138	12/1/00
39	12/1/00	89	12/1/00	139	12/1/00
40	12/1/00	90	12/1/00	140	12/1/00
41	12/1/00	91	12/1/00	141	12/1/00
42	12/1/00	92	12/1/00	142	12/1/00
43	12/1/00	93	12/1/00	143	12/1/00
44	12/1/00	94	12/1/00	144	12/1/00
45	12/1/00	95	12/1/00	145	12/1/00
46	12/1/00	96	12/1/00	146	12/1/00
47	12/1/00	97	12/1/00	147	12/1/00
48	12/1/00	98	12/1/00	148	12/1/00
49	12/1/00	99	12/1/00	149	12/1/00
50	12/1/00	100	12/1/00	150	12/1/00

If more than 150 claims or 10 actions  
staple additional sheet here

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